NOTATIONS TO THE GENERAL PRINCIPLES OF GYMNASTICS

Sections on Passive Movements

By Pehr Henrik Ling

1834 (1840)

Translated from the Swedish

by Lars Agren and Patricia Benjamin, Ph.D.

1986

Translator's Note: The following paragraphs describing some techniques of soft tissue manipulation and passive range of motion were written by Pehr Henrik Ling (1776-1839) as "notations" to a much larger work he wrote on his comprehensive system of human movement. The larger work, *The General Principles of Gymnastics,* were first published posthumously in 1840. In *The General Principles,* Ling expounds on his theory of human movement, health and disease. The section on medical gymnastics describes how various types of passive and active movements can be used to bring a diseased organism back into harmony and health.

The following *Notations to The General Principles* appear in a four volume set of books called *The Collected Works of P.H. Ling,* published in Stockholm, Sweden, in 1866.* The set contains Ling's literary work, poetry and drama, as well as his writings on gymnastics.** The *Notations* were placed immediatedly following a page titled "Closing Remarks" to the *General Principles of Gymnastics.* The *Notations* were evidently not published along with *The General Principles,* and may only appear in this collection of Ling's written work.***

There are thirty-eight separate notations on the various aspects of the systems of gymnastics covered in *The General Principles,* i.e., educational, military, aesthetic and medical. Numbers fifteen through twenty-one expand on the ideas contained in the section of medical gymnastics, and describe in some detail what Ling refers to as passive range of motion. In the larger work, *The General Principles,* Ling does not really describe the techniques of the passive movements, and so these *Notations* may be the only written record that exists in Ling's own words describing his system of manual treatment, the forerunner of today's Swedish massage.

The Notations

15. The basic techniques and methods of support of the passive movements are different for different body parts. (1) As with the active movements, the many different forms of these manipulations overlap each other. To simplify this, one must arrange the manipulations according to the different ways that are required to reach each organ, internally or externally, depending on its sensitivity, external coverage, etc. The eye does not tolerate mechanical treatment in the same way as the foot, or as the inner abdominal organs; the throat does not tolerate in the same way as the ankle or the wrist.

The passive movements can be divided according to the position that the hand of the gymnast takes, therein touching occurs either with a flat or clinched hand, with the points of the fingers, or the outer edge of the hand. (2) The passive movements can also be divided according to the solidity, form, size, depth, position and sensitivity of the inner organ in a diseased or healthy condition.

The passive movements are only carried out with the hand's own form differences, and seldom with the help of external means such as a strike-stick, screw-band, stretcher, etc. SHAKING can be done in many ways through machines that shake with a rotary motion.

Samlade Arbeten af P.H. Ling. Edited by Beslow. Stockholm, Sweden: Adolf Bonnier (publisher), 1866. Title translated: *The Collected Works of P.H. Ling.*

***In this context, the work "gymnastics" does not mean the athletic sport of gymnastics, but was used by Ling to encompass systems of human movement or exercises used to promote health, for defense, for human expression, and to treat physical ailments.*

****Just before Ling died in 1839, he gave the unfinished revisions of The General Principles of Gymnastics* to his son-in-law P.J. Liedbeck, and his colleage Augustus Georgii to edit and publish. The book obviously contains fragments of ideas and unfinished sections. It is possible that Ling intended the *Notations* to be part of the larger work, but there were no clear directions from Ling, and the editors evidently chose not to include them in the larger work.

The oiling used by the Greeks can be used to decrease skin friction, but this hinders the manipulation of the inner abdominal organs.

16. In HACKING, the elbow is usually held at a right angle, the upper arm is still and somewhat close to the side, the wrist bent so that the movement is done with a bending toward the thumb-side and straightening toward the little finger.

Hacking is done with 1) the extreme points of the fingers, 2) the edge of the little finger, 3) the flat hand (clapping), 4) the flat area of the fist.

In SHAKING, the elbows are held closer to each other and closer to the front part of the body, the wrists straight, but not stiff, and vibrations are done with hand or lower arm, totally unnoticed [by the rest of the body], either with the thumbs turned up or also with the finger knuckles turned up. There are many different kinds of shaking, which are done in different ways.

ROLLING with one hand is done only on a joint on a patient, and is done by the circular movement of the wrist; the gymnast is standing still and with the other hand pushes the closest part of the joint wherein rotation will occur toward his body, e.g., the wrist and ankle. (3)

ROLLING with two hands is done at more than one joint (as ankle-, knee-, hip or wrist-, elbow-, shoulder) 1) one hand stirs the extreme joint in the area of its movement, and the other hand forms a kind of shell over the middle joint (elbow, knee) with a cupped contact, to help it do a concentric movement with the first joint. The bigger these circles are, the more the gymnast moves to the outside of the patient, and at the same time remembers to change his angles [positions] in relation to the patient. The gymnast should be able to work with both his hands together or separately; because otherwise he will be dependent on the opportunity (or foreign help), and cannot perform the movement as it should be done without changing the position of the patient or the bed (if the person is confined to a bed), which usually cannot by done without causing inconvenience to the patient. 2) both hands grip equally both shoulders, arms or hands of the patient.

STROKING is done either with the flat hand, with the handgrip, or with the thumb's round end.

PRESSING is done with the round end of the thumb on superficial vessels or nerves, etc., with either the flat hand (resting) on the lower abdomen or with all the fingertips (resting) on the pelvis. As with support, pressure (or stroking) can be done with other body parts, such as the knee (pressing) in the back, etc.

PINCHING and SQUEEZING only cover the closest parts of the skin. It should be even and firm, but not sharp.

KNEADING is more shallow when performed with the fingertips, and partly more embracing when performed with the whole hand.

17. PRESSING, HACKING, CLAPPING, SUPERFICIAL KNEADING, and many other passive movements can be more localized than the active movements. Other passive movements, such as SHAKING and ROLLING of certain body parts, can include large areas; but even larger areas can be included by those movements which require many assistants, such as RINGING, ROLLING OF THE TRUNK, TILTING, etc., in union with LIFTING and SHAKING, and most RIDING.

The common passive movement for the head and the trunk is chiefly ROLLING.

The parts of the neck are treated with STROKING, PRESSING or VIBRATIONS.

The parts of the head are treated in different ways: HACKING, SHAKING, STROKING, PRESSING of different places.

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The organs of the chest are influenced by CLAPPING, STROKING, SHAKING and LIFTING, either specifically or certain ones in combination, as lifting with shaking, or by arm shaking.

The organs of the abdomen and the pelvis are influenced by ROLLING and PRESSING, by DOUBLE-SAWING of two interacting supports of the side of the waist, CLAPPING on the lower back and the waist or side.

The parts of the spine are influenced by STROKING and HACKING.

The parts of the extremities are treated with CLAPPING (knee, sole of foot, arm), ROLLING (hip, shoulder, hand and foot joints), STROKING and KNEADING.

The passive influences on vessels is carried out either by PRESSING on certian proper places with a harder supporting surface underneath, or by STROKING against the valves, or by tilted or leaning body position, or by binding around the narrow parts of the extremities, etc.

The most common passive expressions on nerves are PRESSING and STROKING.

The superficial movements of the skin are the movements which change the most. The passive contractions of the muscles against cramping are done different ways for each muscle.

18. The starting positions of the passive movements are as important as those of the active movements. The human can also benefit from postitions that seem to be in full opposition to its organism, e.g., when upside down, diving, etc. (Notice the similarity with upside down in the uterus — normal position at this degree of development). A system that in itself is a double system, which means antagonism exists within itself; I mean here that the circulatory system must behave antagonistically to itself during a postition in opposite relation to the natural (standing) position of the body. And thereby partially stop to effect some certain part of the organism, as long as that part is fully passive during the movement. Different positions have a great influence on the symptoms of the blood and the respiration, in the heart, lungs, head, face, eyes, etc. With no other means, can one increase the pulse faster than with mechanical means through active movements and through pressure in the vessels.

What Galen says regarding the benefits of friction and pressure is, however, true. I consider his division of movements into four classes correct, however, probably difficult to teach the gymnast. And I believe that the same movements are perceived easiest in three grades; namely, light, strong and hard. Also, the directions for the same movements can be divided into three kinds; namely, 1) on the part that is abnormal, 2) away from the abnormal part, and 3) toward the abnormal part. Of the first kind (on abnormal part), there is STROKING along the legs and other parts for pain, KNEADING and CLAPPING for chronic arthritis, and for other situations, PRESSURE and HACKING on the painful part, or PRESSURE and STROKING of a certain vessel or nerve. The second direction (away from the abnormal part) is used mainly with active movements (to treat) for a strong stoppage of blood flow, flatulence, and in general, for all illness that follows a hypochondriac constitution. The third direction (toward the abnormal part) mainly consists of movements. The effect of these opposite directions are also opposite at a period of cramping — with the valves or against them.

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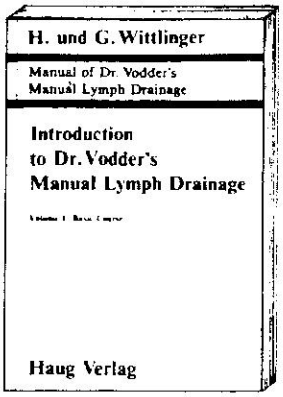
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19. In general, if the execution is turned over to inexperienced hands, there are often great difficulties with the relationships of the movements. If the subject's elbows are held stiff during an arm-rolling performed with support, the movement becomes active-passive. (4) But by leaving all joints of the arms fully passive to the support, then the movement becomes more relieving to the patient.

20. As chemical compounds are given to discover illnesses, so also many illnesses have mechanical symptoms, which can lead to information about an illness, and sometimes also lead to the cure. Movements such as lifting of the arms, jumping, fast movements and pressing, can inform about the existence of a certain illness or the probability of an illness.

21. That consumption in its beginning stages should be treated mechanically, physicians have understood for a long time, and therefore, prescribed riding, travelling, blowing, and sea trips. (5) It is the movement of the waves, not the sea air, that mainly is working; otherwise should consumption be less common at the high sea coast. That gentle blowing, as well as vociferation, is highly beneficial to weak lungs is certain; but for inflamed lungs it can hardly help. Riding is hard to adjust so that it does not give too weak or too strong, too long of too short movement for the lungs; except that for the ill person to keep equilibrium with the horse, they are forced to maintain the position as every healthy rider, and the movement of the horse can thus qualitatively even be dangerous. If movements are given to the ill person on the vippmast or another shaking machine, they can 1) be done to the extreme gentle and then point by point be increased to the highest level, 2) be directed to the point that one wants of the area of the lungs or the abdomen by means of the different planes and angles of the person's position, and 3) be totally passive while the ill person can be held by an assistant during the shaking.■

ENDNOTES

1. In *The General principles of Gymnastics,* Ling distinguishes between total passive, half passive, and active-passive movements. In totally passive movements, the patient is at complete rest. In half passive movements, the patient may assist the operator by holding himself or a certain body part in a particular position. In active-passive movements, the patient may offer some resistance to the passive movement being done, and it therefore partially active. These different types of passive movements include what we know today as soft tissue manipulation and passive range of motion, or range of motion against a resistance. These passive movements, along with certain active movements, comprise Swedish medical gymnasics.

2. The word "gymnast" is used by Ling to refer to the person performing the passive movements on the patient. Today, we would use the words "massage therapist."

3. The description of "rolling" fits what we would term "passive range of motion" today.

4. The patient holding the arm "stiff" is a form of resistance to the passive movement, and therefore, Ling refers to it as "active-passive."

5. "Consumption" is an old term for tuberculosis of the lungs.

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